

Attorney Docket No. <u>1034484-000029</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re F	Patent Application of	MAIL STOP Reply Brief - Patents						
Joon-s	seop Kwak et al.	Group Art Unit: 2812						
Applic	ation No.: 10/673,251	Examiner: SAVITRI MULPURI						
Filing	Date: September 30, 2003	Confirmation No.: 2845						
Title:	GAN BASED GROUP III-V NITRIDE SEMICONDUCTOR LIGHT-EMITTING DIODE AND METHOD FOR FABRICATING THE SAME							
AMENDMENT/REPLY TRANSMITTAL LETTER								
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
Sir:								
Enclosed is a reply for the above-identified patent application.								
	A Petition for Extension of Time is enclosed.							
	Terminal Disclaimer(s) and the $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$							
	Also enclosed is/are:							
	Small entity status is hereby claimed.							
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\square\$ \$ 95 \$\square\$ \$ 790 fee due under 37 C.F.R. § 1.17(e).							
	Applicant(s) requests that any previously unentered after final amendments \underline{not} be entered. Continued examination is requested based on the enclosed documents identified above.							
	Applicant(s) previously submittedcontinued examination is requested.	onfor which						
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.							
	A Request for Entry and Consideration of (1809/2809) is also enclosed.	Submission under 37 C.F.R. § 1.129(a)						

Amendment/Reply Transmittal Letter Application No. <u>10/673,251</u> Attorney's Docket No. <u>1034484-000029</u> Page 2

	No additional cl	aim fee is	required.					
	An additional cl	aim fee is	required, and is	calculated	as shown below:			
			AMENDE	D CLAIMS				
		No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fe		
Total Claims		0	20	0	x \$ 50 (1202)	\$		
Independent Claims		0	3	0	x \$ 200 (1201)			
☐ If A	\$							
Total	\$							
Sm	all Entity Status cla	aimed - sub	tract 50% of Tota	I Claim Ame	endment Fee			
TOTAL	\$							
	Charge to Deposit Account No. 02-4800 for the fee due. A check in the amount of is enclosed for the fee due. Charge to credit card for the fee due. Form PTO-2038 is attached.							
\boxtimes	The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.							
			Respectfull	y submitted	d,			
Date	September 7, 2	<u>007</u>	By:	HNGERSOLL Webstration No.		-		

P.O. Box 1404 Alexandria, VA 22313-1404 703 836 6620